



# Sponsor Organization's Specialty License Plate Annual Certification Application

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Organizations are required to complete an annual certification and submit supporting documentation.

Section 1: Applicant Information			
Sponsor Name:			
Telephone Number:	Website:	Tax ID Number:	
Mailing Address:	City:	State:	Zip:
Physical Address:	City:	State:	Zip:

Section 2: Liaison Information			
Printed Name of Sponsored Liaison:			
Liaison Telephone Number:	Email Address:		
Liaison Mailing Address:	City:	State:	Zip:

### Section 3: Sponsor Organization Information

1. Is the sponsor required to register with the Montana Secretary of State (SOS)?  Yes  No
  - a. If yes, is the sponsor in good standing with SOS?  Yes  No
2. Is the person listed as the liaison authorized to act as the sponsor's liaison?  Yes  No
3. Is the sponsor organization a tax-exempt organization under 26 U.S.C. 501(c)(3)  Yes  No
4. Is the sponsor organization required to file annual tax filing documents, including 990N, 990EZ, 990PF, or 990? If no, why not?  Yes  No

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5. Is the sponsor organization of service to the community through specific programs that promote improving health, education, or general welfare?  Yes  No
  - a. If no, is the sponsor organization comprised of military service veterans?
6. Headquarters or base of operations:
  - a. Is the sponsor headquarters or base of operations in this state? If no, where is it?  Yes  No
  - b. Is the sponsor a chapter or branch of an international, national, or regional organization?  Yes  No
  - c. If yes, is the chapter or branch in good standing and has authorization in writing from the parent organization to use the name and graphic of the parent organization? If no, describe:  Yes  No

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### Section 3: Sponsor Organizations (cont.)

- 7. Is this sponsor a Montana entity?  Yes  No
- 8. Does the sponsor have an active telephone number?  Yes  No
- 9. Are 75% of the donation fees collected for generic plates spent in Montana?  Yes  No
- 10. In the last calendar year, the sponsor collected \$
  - a. In the last calendar year, the sponsor spent \$
- 11. The name, identifying phrase, and graphic on the generic specialty license plate
  - a. Is the sponsor authorized to use them?  Yes  No
  - b. Is there any infringement or violation of any property right in the use of them?  Yes  No

### Section 4: Required Documents Enclosed with Certification

You must enclose the following documents with your annual certification form.

Do NOT staple your documents.

- Copy of current Montana Secretary of State's certification of good standing
- Copy of IRS determination letter
- Copy of current federal income tax filing documents
  - IRS Form 990N, 990EZ, or 990PF, or 990
  - Other: \_\_\_\_\_
  - Organization is not required to submit annual tax filing documents
- List of current Board of Directors, positions, and contact information
- Additional documentations showing 75% of collected fees from Specialty License Plates were spent in Montana for the last calendar year.
  - Balance Sheet
  - Profit and Loss statement
  - Attach a form MV117A describing how the money collected by the Specialty License Plate was spent and detailing whether it was spent in or outside of Montana
- Proof of Montana banking institute
  - 1<sup>st</sup> page of most recent bank statement showing sponsor name, address, date, banking institution's name, and account number
  - Redact all financial information from this page, including balances, debits, and credits



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## Section 5: Indemnification

By signing this application, the Sponsor agrees to indemnify, hold harmless, and release DOJ/MVD and their officers, agents, and employees from and against all loss, damages, injury, liability, suits, and proceedings arising from the use of the name, identifying phrase, and graphic on the generic specialty license plate, including but not limited to any loss, damages, injury, liability, suits, or proceedings from the use of the name, identifying phrase, and graphic.

## Section 6: Certification

- I understand and accept § 61-3-472 through § 61-3-481, MCA Specialty License Plate requirements.
- I have reviewed my organization's information as listed on the Motor Vehicle Division's website <https://dojmt.gov/driving/plate-designs-and-fees/> and no updates are needed at this time. If updates are needed, submit form MV115 or MV116 as applicable.
- Under penalty of law (§ 45-7-203, MCA), I certify that:
  - The statements made and information contained on this form, the attached form, and banking statements are true and correct to the best of my knowledge, information, and belief;
  - I am the person named on this form; and
  - If signing for a business entity or trust, I have full authority to do so.

Dated this \_\_\_\_\_ Day of \_\_\_\_\_, 20 \_\_\_\_\_

Printed name

Legal signature

## Section 7: Department Use Only

- The application for sponsorship is approved
- The application for sponsorship is rejected for the following reasons:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Specialty Plate Coordinator Signature:	Date:
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